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## ABSTRACT

A survey was conducted by the League for Innovation in the Community College and Johnson County Community College to determine the state of the dental hygiene profession. The study sought the opinions of all dental hygiene program administrators in the United States and Canada regarding the principal concerns facing dental hygiene education and the perceived desirability and likelihood of possible developments in the field. Study findings, based on responses from 152 of the 215 administrators surveyed, included the following: (1) 69.8% of the respondents held an associate's degree or certificate program; (2) there was a general agreement that the most pressing educational concerns were academically less-prepared program applicants, fewer applicants, decreasing and inadequate program budgets, and decreasing demand for dental hygienists; (3) of possible developments in the field, increased job satisfaction for professionals, cooperation between hygienists and dentists, and increased representation of hygienists on state dental boards were rated as most desirable; (4) administrators who were dentists tended to be more conservative in their assessment of desirable changes in the field than their colleagues who were dental hygienists; and (5) the respondents viewed an increased emphasis on continuing education, increased representation of hygienists on dental boards, and competition between dentists and hygienists concerning dental care delivery to be most likely. The questionnaire is appended. (HB)

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# Issues in Dental Hygiene Education and Practice:

## Perceptions and Concerns of Dental Hygiene Program Administrators

sponsored by  
The League for Innovation in the Community College  
and  
Johnson County Community College

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The dental hygiene profession has reached a cross-roads in its development. Questions about the proper relationship between dentists and hygienists in the delivery of dental care have been raised, and concerns regarding both the appropriate level of education provided by dental hygiene programs and the academic preparedness of program applicants have been actively discussed within the dental care professions.

In order to give form and substance to the discussion, the League for Innovation in the Community College and Johnson County Community College, both of which have taken leading roles in dental hygiene education in community colleges, co-sponsored a study to determine the state of the profession in the eyes of those entrusted with the education of future hygienists. A survey of all dental hygiene program administrators in the United States and Canada was conducted to determine their concerns and perceptions of the future of the profession. Specifically, the study was designed to determine the following:

1. the principal concerns currently facing dental hygiene education, and
2. the perceived desirability and likelihood of possible developments in dental hygiene education and professional practice.

Over 70% of all administrators of dental hygiene programs in postsecondary education responded to a survey designed by the President of the American Dental Hygienists' Association and the Office of Institutional Research at Johnson County Community College. The results of this survey follow. They provide the basis for discussion of possible courses of action regarding the future of dental hygiene education and practice.

### The Respondents

One hundred and fifty-two of the 215 dental hygiene program administrators nationwide responded to the Dental Hygiene Issues Inventory. Both the response rate to the survey and the demographic profile of the respondents suggest that the responding administrators are representative of all dental hygiene program administrators.

Approximately 66% of the responding administrators held master's degrees, and another 25% held D.D.S., D.M.D. or other doctorate degrees. Ninety percent of those holding professional degrees in dentistry were males. Approximately 80% of these program administrators were females. About 65% were between the ages of 30 and 49, and the average length of experience in their professions was 8.3 years. Nearly 70% of the respondents headed 2-year associate's degree or certificate programs, and over 20%

headed programs leading to a bachelor's degree.

Eleven of the districts in the League for Innovation in Community Colleges support dental hygiene programs. 10 of these responded to the survey.

### Concerns in Dental Hygiene Education

There was overwhelming agreement among various groups of program administrators of the most pressing concerns facing dental hygiene education. In order, the greatest concerns were the following:

- Academically less-prepared dental hygiene program applicants.
- Fewer students applying to dental hygiene programs.
- Decreasing and inadequate program budgets.
- Decreasing demand for dental hygienists.
- Competition from other professions for qualified students.

TABLE 1  
Profile of Responding  
Dental Hygiene Program Administrators

| Characteristic              | Number | Percent |
|-----------------------------|--------|---------|
| DEGREE:                     |        |         |
| bachelor's                  | 21     | 13.8%   |
| master's                    | 87     | 57.2%   |
| D.D.S. or D.M.D.            | 30     | 19.7%   |
| other doctorate             | 9      | 5.9%    |
| other                       | 5      | 3.3%    |
| PROGRAM TYPE:               |        |         |
| certificate                 | 11     | 6.4%    |
| 2-year / associate's degree | 110    | 63.4%   |
| 4-year / bachelor's degree  | 11     | 6.4%    |
| master's degree             | 37     | 21.4%   |
| other                       | 4      | 2.3%    |
| AGE:                        |        |         |
| under 30                    | 16     | 10.6%   |
| 30-39                       | 51     | 33.8%   |
| 40-49                       | 45     | 29.8%   |
| 50-59                       | 29     | 19.2%   |
| over 60                     | 10     | 6.6%    |
| SEX:                        |        |         |
| male                        | 33     | 21.7%   |
| female                      | 119    | 78.3%   |
| TOTAL RESPONSES:            | 152    | 100.0%  |

Overall, both dentists (those administrators holding D.D.S. or D.M.D. degrees) and dental hygienists (those administrators holding other degrees) ranked the same issues as priority concerns. However, the dentists were significantly less concerned than the hygienists about the "decreasing prestige of the dental hygiene profession" and the "decreasing demand for dental hygienists." Administrators of two-year associate's degree programs and of four-year bachelor's degree programs also had very similar concerns. Nonetheless, four-year program administrators were significantly more concerned about the "decreasing prestige of the dental hygiene profession," "competition between two-year and four-year programs for qualified students," "fewer students applying to dental hygiene programs," and "decreasing and inadequate program budgets" than two-year program administrators.

Respondents representing League colleges differed most from all other groups in their perceptions of the most pressing problems facing dental hygiene education. Dental hygiene program administrators in the League were considerably less concerned than others about decreasing budgets, fewer applicants and the decreasing prestige of the profession. Rather, League colleges were primarily concerned about quality. In order, their greatest concerns were the following:

- Academically less-prepared students.
- Lack of commitment and professional attitudes in dental hygiene program applicants.
- Competition from other professions for qualified students.
- Inability of program curricula to include all new developments in the field.
- Lack of opportunities for dental hygiene faculty to develop professionally.

The results indicated that dental hygiene programs in League colleges seem relatively secure and healthy, at least in the perceptions of those who administer them. Concerns of decreasing budgets and fewer applicants that are apparently of major concern to other program administrators, particularly in four-year institutions, do not appear to threaten these programs. Concerns for quality, for professional development opportunities for faculty, and for expanding program curricula replaced concerns for survival.

### Possible Developments

Dental hygiene program administrators also agreed concerning the desirability of possible developments in dental hygiene education and practice. With a few major exceptions, different groups of administrators ranked developments similarly. Those developments ranked overall as most desirable were, in order, the following:

- Increased job satisfaction for dental hygiene professionals.
- Cooperation between dental hygienists and dentists in the delivery of dental care.
- Increased representation of dental hygienists on state dental boards.
- Increased compensation corresponding to job responsibility for dental hygienists.
- Increased number of alternative practice settings.

The major exceptions to this consensus among program administrators about the desirability of selected developments in the field were differences among dentists and hygienists. In general, dental hygiene program administrators who held D.D.S. or D.M.D. degrees were significantly less likely to find an entire range of developments associ-

ated with expanding the scope of responsibility and practice of dental hygienists desirable than were program administrators who held other degrees. Specifically, there were statistically significant differences in the responses of dentists and hygienists concerning the desirability of the following developments:

1. Relaxed requirements for dentist supervision.
2. Opportunities for independent practice for dental hygienists.
3. Increased scope of procedures performed by dental hygienists.
4. Increased number of alternative settings for dental hygienist practice.
5. Expanded educational curricula to reflect expanded practice settings.
6. Control over dental hygiene licensure by state dental hygiene boards.
7. Control over dental hygiene program accreditation by the dental hygiene professional association.
8. Increased representation of dental hygienists on state dental boards.

Differences among other groups of respondents, for instance, among administrators in two-year and four-year programs, were minor. Clearly, the major disagreements concerning the future direction of dental hygiene were among dentists and hygienists.

Two facts are important to note concerning this conclusion. First, dentists and hygienists did not fundamentally disagree about the rank priority of desirable developments in dental hygiene practice and education. Rather, they differed significantly in their perceptions of how desirable these developments were for the delivery of dental care. For

**TABLE 2**  
**Ranking of Selected Priority Concerns**  
**in Dental Hygiene Education**

| Concern                                                   | Ranks for each Group of Respondents |                 |          |            |                |                |
|-----------------------------------------------------------|-------------------------------------|-----------------|----------|------------|----------------|----------------|
|                                                           | All respondents                     | League colleges | Dentists | Hygienists | 2-year program | 4-year program |
| Academically less-prepared students                       | 1st                                 | 1st             | 2nd      | 1st        | 1st            | 5th            |
| Fewer applicants                                          | 2nd                                 | 9th             | 1st      | 4th        | 3rd            | 1st            |
| Decreasing budgets                                        | 3rd                                 | 7th             | 5th      | 2nd        | 5th            | 4th            |
| Decreasing demand for hygienists                          | 4th                                 | 6th             | 6th      | 3rd        | 2nd            | 2nd            |
| Competition from other professions for students           | 5th                                 | 4th             | 4th      | 6th        | 6th            | 6th            |
| Lack of opportunities to develop professionally           | 6th                                 | 5th             | 3rd      | 4th        | 4th            | 10th           |
| Decreasing prestige of profession                         | 7th                                 | 9th             | 18th     | 5th        | 11th           | 3rd            |
| Inability of curricula to include new developments        | 8th                                 | 3rd             | 10th     | 7th        | 8th            | 8th            |
| Lack of professional commitment / attitudes in applicants | 9th                                 | 2nd             | 7th      | 10th       | 7th            | 9th            |

instance, both groups ranked increased representation of dental hygienists on state dental boards as one of the five most desirable developments, though hygienists rated the practice "very desirable" and dentists rated it "somewhat desirable." The differences in perceptions of dentists and hygienists were a matter of degree, not of priority.

### Likely Developments

Program administrators rated the entire range of possible developments in the dental hygiene profession as more desirable than likely to occur. Still, all groups of respondents shared similar views of the likelihood of various developments. In order, those perceived to be most likely to occur by dental hygiene program administrators were the following:

- Increased emphasis on continuing education of dental hygiene professionals.
- Increased representation of dental hygienists on state dental boards.
- Competition between hygienists and dentists concerning the delivery of dental care.
- Expanded curricula to reflect expanded practice settings.
- Increased number of alternative settings for dental hygiene practice.

Again, dentists held slightly different views of the future than all other groups of respondents. They were optimistic about the likelihood of cooperation between dentists and hygienists concerning the delivery of dental care while all other respondents thought competition to be much more likely. As well, dentists were optimistic about the potential for increased job satisfaction for hygienists, while hygienists were considerably less sanguine about such prospects.

Nonetheless, consensus concerning likely developments was much more apparent than discord. The only statistically significant differences concerned the likelihood of competition among hygienists and dentists, the likelihood of increased research emphasis in dental hygiene education, and the likelihood of increased alternative settings in which hygienists might practice. Hygienists, particularly those who are program administrators in four-year institutions, perceived expanding the scope of responsibility and practice of dental hygienists that results in competition with dentists to be a considerably more likely development.

### Implications

The results of this survey provide insight into the concerns that define the current state of dental hygiene education and professional practice, as well as the issues that will determine its future.

The survey results suggest that there is a general consensus among administrators of dental hygiene programs about the state of education in the field. Similar concerns about the declining qualifications of program applicants, decreasing program resources, and decreasing demand for dental hygienists were shared by the majority of program administrators. These concerns are certainly related. If the dental hygiene profession is seen as one offering fewer rewards and opportunities, it should not be surprising that fewer and less qualified students are applying for entry into the dental hygiene profession than for entry into another more promising one.

While both the results of the survey and familiarity with the field indicate that the profession of dental hygiene has

**TABLE 3**  
Rankings of Perceived Desirability and Likelihood of Developments in the Dental Hygiene Profession

|                                                                               | Desirability  |                 |          |            |                |                | Likelihood    |                 |          |            |                |                |
|-------------------------------------------------------------------------------|---------------|-----------------|----------|------------|----------------|----------------|---------------|-----------------|----------|------------|----------------|----------------|
|                                                                               | All responses | League colleges | Dentists | Hygienists | 2-year program | 4-year program | All responses | League colleges | Dentists | Hygienists | 2-year program | 4-year program |
| Increased job satisfaction                                                    | 1st           | 1st             | 1st      | 1st        | 1st            | 1st            | 9th           | 7th             | 5th      | 9th        | 7th            | 8th            |
| Cooperation between dentists and hygienists                                   | 2nd           | 3rd             | 2nd      | 3rd        | 2nd            | 3rd            | 6th           | 7th             | 2nd      | 7th        | 6th            | 7th            |
| Increased representation on state dental boards                               | 3rd           | 1st             | 4th      | 2nd        | 3rd            | 5th            | 2nd           | 3rd             | 2nd      | 3rd        | 2nd            | 3rd            |
| Increased compensation                                                        | 4th           | 5th             | 3rd      | 4th        | 4th            | 4th            | 13th          | 12th            | 9th      | 13th       | 13th           | 12th           |
| Increased number of practice settings                                         | 5th           | 5th             | 6th      | 5th        | 5th            | 2nd            | 5th           | 5th             | 8th      | 4th        | 5th            | 2nd            |
| Increased emphasis on continuing education                                    | 6th           | 3rd             | 4th      | 8th        | 6th            | 8th            | 1st           | 2nd             | 1st      | 1st        | 1st            | 4th            |
| Increased scope of procedures performed                                       | 7th           | 5th             | 7th      | 6th        | 7th            | 6th            | 7th           | 7th             | 7th      | 6th        | 7th            | 10th           |
| Expanded program curriculum                                                   | 8th           | 9th             | 8th      | 7th        | 8th            | 9th            | 4th           | 3rd             | 4th      | 5th        | 4th            | 6th            |
| Relaxed dentist supervision requirements                                      | 9th           | 5th             | 10th     | 9th        | 9th            | 7th            | 12th          | 12th            | 12th     | 12th       | 11th           | 9th            |
| Increased research emphasis                                                   | 10th          | 12th            | 9th      | 10th       | 11th           | 10th           | 8th           | 11th            | 11th     | 8th        | 8th            | 5th            |
| Control over licensure by state dental hygiene boards                         | 11th          | 11th            | 11th     | 11th       | 10th           | 12th           | 14th          | 15th            | 15th     | 14th       | 14th           | 15th           |
| Clear distinction between 2-year and 4-year programs                          | 12th          | 15th            | 12th     | 12th       | 14th           | 11th           | 10th          | 7th             | 10th     | 10th       | 11th           | 11th           |
| Independent practice                                                          | 13th          | 10th            | 15th     | 13th       | 12th           | 13th           | 15th          | 14th            | 16th     | 15th       | 16th           | 14th           |
| Control over program accreditation by dental hygiene professional association | 14th          | 14th            | 13th     | 14th       | 13th           | 14th           | 16th          | 15th            | 14th     | 16th       | 15th           | 16th           |
| Increased licensure requirements                                              | 15th          | 12th            | 14th     | 15th       | 15th           | 15th           | 11th          | 5th             | 13th     | 10th       | 10th           | 12th           |
| Competition between dentists and hygienists                                   | 16th          | 16th            | 16th     | 16th       | 16th           | 16th           | 3rd           | 1st             | 6th      | 2nd        | 3rd            | 1st            |
| Decreased licensure requirements                                              | 17th          | 17th            | 17th     | 17th       | 17th           | 17th           | 17th          | 17th            | 17th     | 17th       | 17th           | 17th           |

**Identical ranks represent ties.**

not yet reached a dangerous state of decline, the concerns expressed by program administrators suggest that planning to avert such a decline is, at the very least, prudent. The perceived desirability and likelihood of possible developments in the field of dental hygiene suggest issues that need to be addressed in planning for the future of the profession.

The changes in education and professional practices perceived by dental hygiene program administrators as desirable represent an obvious agenda for action, particularly since there was a strong consensus among all respondent groups concerning the priority of these developments. Essentially, program administrators agreed that it was desirable that dentists and hygienists cooperate to bring about increased job satisfaction and compensation for dental hygiene professionals. All groups, including administrators who are dentists as well as those who are hygienists, agreed that increased representation of hygienists on state dental boards was also desirable.

However, with regard to what changes in professional practice were desirable to bolster the dental hygiene profession, dentist-program administrators were more conservative than their dental hygienist colleagues. Hygienists thought an entire range of developments, all aimed at increasing the responsibilities of dental hygiene professionals in the delivery of dental care, was a desirable means by which to upgrade the profession. Not only did hygienist-program administrators perceive increasing the independence, scope of procedures, and settings in which hygienists could practice as desirable, but they also perceived gaining greater control over licensure requirements and program accreditation to be positive developments for the profession. Yet these developments would be likely to threaten dentists who have traditionally maintained control over their supporting profession and have strictly presented the hygienist's role. In fact, results of the survey indicated quite clearly that hygienists believed competition with dentists to be very likely, while the dentists anticipated cooperation rather than competition.

The results of the survey can be interpreted to suggest at least two basic courses of action that might prevent slippage in the health of the dental hygiene profession. The first course would be to pursue expanded professional responsibilities for hygienists that were identified as desirable by the hygienist-program administrators surveyed. Realistically, this might lead to disagreement with the dental profession, which is likely to be considerably more conservative than even the responding dentist-program administrators. The level of disagreement would likely increase in direct relationship to how closely such expanded responsibilities approximated independent practices for hygienists. The survey indicated that even some hygienists were not so confident of the desirability of such a course of action.

On the other hand, the survey also identified those developments that all respondents, including dentists, hygienists, and administrators in two-year and four-year programs, believed to be both desirable and likely to occur. Increasing opportunities for continuing education for dental hygienists and expanding program curricula were by consensus logical, and minimally confrontative, first steps. As well, all respondents indicated both the desirability and likelihood of increased representation of dental hygienists on state dental boards — another possible first step that the survey indicated might avoid overwhelming resistance. Finally, the one expansion of the professional responsibilities of dental hygienists that the survey indicated has some broad support is increasing the number of

alternative settings in which hygienists can practice. These steps represent a second, more conservative course of action that might minimize disagreement and garner support for its implementation.

An important caveat concerning these results is that they are drawn from the responses of dental hygiene program administrators in colleges and universities throughout the United States and Canada. The results can be confidently asserted to represent their views, but whether dentists and hygienists who administer dental hygiene programs hold opinions similar to the larger group of dentists and hygienists in private practice is a question left unanswered by the study.

**TABLE 4**  
**Significant Differences in Perceived Desirability**  
**of Developments Between Dentists and Hygienists**

| Possible Development                                                              | Mean Score |      | Statistical Significance |
|-----------------------------------------------------------------------------------|------------|------|--------------------------|
|                                                                                   | Dent.      | Hyg. |                          |
| Relaxed dentist supervision requirements                                          | 1.79       | 1.23 | .0000                    |
| Independent practice                                                              | 2.32       | 1.68 | .0001                    |
| Increased scope of procedures                                                     | 1.54       | 1.19 | .0017                    |
| Increased alternative practice settings                                           | 1.37       | 1.11 | .0033                    |
| Expanded program curricula                                                        | 1.69       | 1.19 | .0000                    |
| Control over licensure by state dental hygiene boards                             | 1.93       | 1.44 | .0005                    |
| Control over program accreditation by the dental hygiene professional association | 2.24       | 1.71 | .0015                    |
| Increased representation of dental hygienists on state dental boards              | 1.24       | 1.03 | .0008                    |

1. A score of 1.00 equals very desirable; range is 1.00 to 3.00.
2. Less than .05 represents significant difference.



**April 1983**  
**Office of Institutional Research**  
**Johnson County Community College**

## DENTAL HYGIENE ISSUES INVENTORY

Please respond to the following questions by checking the most appropriate answer to each. Your responses will be used to identify issues in dental hygiene education and other developments in the field.

### Information Questions

1. Your position: ☐ dental hygiene program administrator  
☐ dental hygiene faculty  
☐ other, please specify \_\_\_\_\_
2. Your highest degree:  
☐ bachelor's ☐ D.D.S. or D.M.D.  
☐ master's ☐ other doctorate  
☐ other, please specify \_\_\_\_\_
3. Your professional experience: (Indicate number of years of experience in each professional setting. Include all relevant experience.)

| <u>Years</u> | <u>Setting</u>                |
|--------------|-------------------------------|
| _____        | public health                 |
| _____        | college or university program |
| _____        | private practice              |
| _____        | hospital                      |
| _____        | public school systems         |
| _____        | other, please specify _____   |
4. Your sex: ☐ male ☐ female
5. Your age: ☐ under 30 years  
☐ 30 - 39 years  
☐ 40 - 49 years  
☐ 50 - 59 years  
☐ over 60 years
5. Type of dental hygiene program in which you are currently employed:  
(Check all that apply.)

|                                                            |                                                           |
|------------------------------------------------------------|-----------------------------------------------------------|
| <input type="checkbox"/> certificate program               | <input type="checkbox"/> 4-year/bachelor's degree program |
| <input type="checkbox"/> 2-year/associate's degree program | <input type="checkbox"/> master's degree program          |
| <input type="checkbox"/> other, please specify _____       |                                                           |
7. Is your institution a member of the League for Innovation in Community Colleges?  
☐ yes  
☐ no
8. Your institution's zipcode: \_\_\_\_\_

### Issues in Dental Hygiene Education

Please indicate your level of concern for each of the following potential problems for dental hygiene education:

|                                                                                            | <u>very<br/>concerned</u> | <u>moderately<br/>concerned</u> | <u>only<br/>slightly<br/>concerned</u> | <u>not<br/>at all<br/>concerned</u> |
|--------------------------------------------------------------------------------------------|---------------------------|---------------------------------|----------------------------------------|-------------------------------------|
| 9. Fewer students applying to dental hygiene programs                                      | ___                       | ___                             | ___                                    | ___                                 |
| 10. Academically less-prepared dental hygiene applicants                                   | ___                       | ___                             | ___                                    | ___                                 |
| 11. Lack of commitment and professional attitudes in dental hygiene applicants             | ___                       | ___                             | ___                                    | ___                                 |
| 12. Competition between 2-year and 4-year dental hygiene programs for qualified applicants | ___                       | ___                             | ___                                    | ___                                 |
| 13. Competition from other professions for qualified students                              | ___                       | ___                             | ___                                    | ___                                 |
| 14. Higher attrition rates in dental hygiene programs                                      | ___                       | ___                             | ___                                    | ___                                 |
| 15. Decreasing student performance on written licensure exams                              | ___                       | ___                             | ___                                    | ___                                 |
| 16. Decreasing student performance on practical licensure exams                            | ___                       | ___                             | ___                                    | ___                                 |
| 17. Over-enrollment in dental hygiene programs                                             | ___                       | ___                             | ___                                    | ___                                 |
| 18. Too many dental hygiene programs                                                       | ___                       | ___                             | ___                                    | ___                                 |
| 19. Difficulty in finding qualified dental hygiene faculty                                 | ___                       | ___                             | ___                                    | ___                                 |
| 20. High faculty turnover                                                                  | ___                       | ___                             | ___                                    | ___                                 |
| 21. Inadequate teaching facilities and equipment                                           | ___                       | ___                             | ___                                    | ___                                 |
| 22. Obsolescence of equipment                                                              | ___                       | ___                             | ___                                    | ___                                 |
| 23. Decreasing and inadequate program budgets                                              | ___                       | ___                             | ___                                    | ___                                 |
| 24. Lack of opportunities for dental hygiene faculty to develop professionally             | ___                       | ___                             | ___                                    | ___                                 |
| 25. Inadequate continuing education opportunities for faculty                              | ___                       | ___                             | ___                                    | ___                                 |
| 26. Decreasing demand for dental hygienists                                                | ___                       | ___                             | ___                                    | ___                                 |
| 27. Difficulty in placing program graduates in professional positions                      | ___                       | ___                             | ___                                    | ___                                 |
| 28. Decreasing prestige of the dental hygiene profession                                   | ___                       | ___                             | ___                                    | ___                                 |
| 29. Inability of program curricula to include all new developments in the field            | ___                       | ___                             | ___                                    | ___                                 |
| 30. Inability of program faculty to keep pace with developments in the field               | ___                       | ___                             | ___                                    | ___                                 |

# Possible Developments in the Dental Hygiene Profession

Please rate both the likelihood and the desirability of the following possible developments in the dental hygiene profession by checking one response in each category for each item:

|                                                                                               | Likelihood  |                 |            | Desirability   |                    |               |
|-----------------------------------------------------------------------------------------------|-------------|-----------------|------------|----------------|--------------------|---------------|
|                                                                                               | very likely | somewhat likely | not likely | very desirable | somewhat desirable | not desirable |
| 31. Increased scope of procedures performed                                                   | —           | —               | —          | —              | —                  | —             |
| 32. Increased number of alternative settings                                                  | —           | —               | —          | —              | —                  | —             |
| 33. Relaxed requirements for dentist supervision                                              | —           | —               | —          | —              | —                  | —             |
| 34. Opportunities for independent practice                                                    | —           | —               | —          | —              | —                  | —             |
| 35. Increased compensation corresponding to job responsibility                                | —           | —               | —          | —              | —                  | —             |
| 36. Increased job satisfaction for dental hygiene professionals                               | —           | —               | —          | —              | —                  | —             |
| 37. Increased requirements for dental hygiene licensure                                       | —           | —               | —          | —              | —                  | —             |
| 38. Decreased requirements for dental hygiene licensure                                       | —           | —               | —          | —              | —                  | —             |
| 39. Increased emphasis on research in dental hygiene education                                | —           | —               | —          | —              | —                  | —             |
| 40. Competition between dental hygienists and dentists concerning the delivery of dental care | —           | —               | —          | —              | —                  | —             |
| 41. Cooperation between dental hygienists and dentists concerning the delivery of dental care | —           | —               | —          | —              | —                  | —             |
| 42. Control over dental hygienist licensure by state dental hygiene boards                    | —           | —               | —          | —              | —                  | —             |
| 43. Increased representation of dental hygienists on state dental boards                      | —           | —               | —          | —              | —                  | —             |

|                                                                                                                                         | Likelihood  |                 |            | Desirability   |                    |               |
|-----------------------------------------------------------------------------------------------------------------------------------------|-------------|-----------------|------------|----------------|--------------------|---------------|
|                                                                                                                                         | very likely | somewhat likely | not likely | very desirable | somewhat desirable | not desirable |
| 44. Control over dental hygiene program accreditation by the dental hygiene professional association                                    | —           | —               | —          | —              | —                  | —             |
| 45. Increased emphasis on continuing education for dental hygiene professionals                                                         | —           | —               | —          | —              | —                  | —             |
| 46. Clear distinction between associate's degree and bachelor's degree dental hygiene education                                         | —           | —               | —          | —              | —                  | —             |
| 47. Expanded educational curricula to reflect expanded practice settings                                                                | —           | —               | —          | —              | —                  | —             |
| 48. Please add any additional comments regarding your concerns, issues in dental hygiene education and other developments in the field. |             |                 |            |                |                    |               |

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